Annual ODA Report and Multi-Year Accessibility Plan

April 2014 to March 2015

Submitted to LHSC Board of Directors

Submitted by LHSC's Accessibility Working Group

March 2014

Introduction

At London Health Sciences Centre (LHSC) we are committed to improving access to our facilities and services for patients, their families, employees, physicians, students, volunteers and visitors.

Guided by our values of respect and collaboration, and the principles of the Accessibility for Ontarians with Disabilities Act (AODA) we continue to work towards eliminating barriers at LHSC.

Since 2003, London Health Sciences Centre has prepared annual accessibility plans that address physical, informational, communicational, attitudinal, technological and policy barriers as required under the Ontarians with Disabilities Act 2001, (ODA). The time period for this plan is from April 2014 to March 2015 in alignment with the hospital's fiscal year.

The AODA (June 2005) requires hospitals to implement specific policies, procedures and plans which will contribute to making hospitals fully accessible by 2025. As of January 1st, 2013, a multi-year accessibility work plan has been prepared that addresses the Integrated Accessibility Standards Regulations (IASR) under the AODA. Documents related to the regulation are available upon request. Annual status updates are also included in this plan.

LHSC's plan will:
- Summarize the actions taken to remove and prevent barriers in the 2013/2014 Accessibility Plan;
- Outline the methodology used to identify barriers;
- Set out the actions planned to remove and prevent barriers from April 2014 to March 2015;
- Outline the applicable Integrated Accessibility Standards Regulations and LHSC's plan to meet the regulations for the upcoming years
- Outline the status of LHSC meeting the applicable Integrated Accessibility Standard Regulations
- Describe how the plan will be communicated internally and to the public

Table of Contents

1. Description of London Health Sciences Centre

London Health Sciences Centre (LHSC) is an academic health sciences centre with the following primary facilities: University Hospital, South Street Annex, Victoria Hospital, and Children's Hospital. Staff members total over 10,000 and the budget for last year was about $1.3 billion. Additional information about LHSC is available at http://www.lhsc.on.ca/About_Us/LHSC/Who_We_Are/Facts_And_Stats/FactsandStats10.pdf

LHSC has completed an accessibility plan annually since 2003. Previous plans are posted on LHSC's internet site under *Publications* or go to http://www.lhsc.on.ca/About_Us/LHSC/Publications/index.htm.

2. Aim of the Accessibility Plan

This plan will:
- Summarize the actions taken to remove and prevent barriers in the 2013/2014 Accessibility Plan;
- Outline the methodology used to identify barriers;
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3. Accessibility Working Group

In accordance with the ODA, senior leaders from LHSC and St. Joseph's Health Care, London (St. Joseph's) formally constituted the LHSC and St. Joseph's Accessibility Working Groups in April 2003.

The Ministry of Community and Social Services announced that the ODA would be repealed once the AODA was in place. To date this has not occurred. In anticipation of the ODA being repealed, the Accessibility Working Group was disbanded in late 2008; however it reconvened in June 2009 to meet the requirements of the Act.

While some members of the working group have disabilities, other members have experience working with patients and staff members who have a range of disabilities. In the upcoming year, the working group will extend invitations to several members of the community to join as advisors to the group.

4. Planning Cycle

According to the [Ontarians with Disabilities Act 2001](#), (ODA), *each year every scheduled organization shall prepare an accessibility plan.* The first plan was due in September 2003 and since then each accessibility plan has covered the time period from October to September. Beginning in 2011, the hospital aligned the cycle with its business planning cycle. The current plan to remove barriers will cover the period from April 2014 to March 2015. The multi-year work plan will address the hospital's strategies to comply with current and upcoming regulations, working on becoming an accessible organization by 2025.

5. Barrier removal initiatives for April 2013 to March 2014

a) **University Hospital - For people with limited mobility the shortest distance from the Voyageur drop off point to the main elevators is through the side corridor.**
Directional signage is posted to help people navigate to the main lobby. *Project Status: Complete*

b) **University Hospital, PDC -Two sets of heavy doors leading from elevator banks across walkway to the main building.**
Both sets of doors have been replaced with push button automation installed. *Project Status: Complete.*

c) **University Hospital -Washroom off main floor lobby not accessible.**
Architect engaged in reconfiguring the space. Short term: Automatic door has been installed for a unisex accessible washroom. Long term: Reconfigure space for 2 larger accessible washrooms. *Project Status: In Progress*

d) **University Hospital Medical Imaging – 2nd floor C2-241/243**
Change room not large enough to accommodate someone in a wheelchair or scooter. Redesign change rooms to make one larger room. *Project Status: Not moving forward at this time.*

e) **All sites - Barriers are often better identified by those with disabilities.**
 Representatives from Engineering, member from the Accessibility Working Group, people with a variety of disabilities and/or their caregivers. *Project Status: In Progress.*

f) **All sites - Insufficient parking information is available for people using mobility aids to plan their trip to and from the hospital.**
 Parking maps are posted on external and internal website for each hospital. *Project Status: Complete*

g) **All Sites - Staff report not knowing where accessible washrooms are located.**

Wayfinding Action Team has created large wall mounted maps that show standard, family and accessible washrooms. 10 maps have been posted in prominent areas of Victoria hospital, for example outside E Zone Tim Horton's. VH was deemed as the higher priority for wayfinding needs. Planning will be continuing to post more maps throughout the sites. These maps will also be posted online. *Project Status: In Progress.*

h) **All Sites – Training rates for Excelling at Accessible Customer Service**
As of March 20th, 2014, LHSC is at 99% compliancy rate for staff completing online training. *Project Status: In progress to strive toward 100% compliancy.*

i) **University hospital - Occupational Health & Safety A1-450 entrance is difficult to open**
Install an automatic push button door opener. *Project Status: Complete*

j) **All sites - People with limited mobility require the shortest route possible from parking to department.**
Tear off maps have been sent for printing and will be handed out by volunteers at main entrances. Will also be posted on website for people to print at home. *Project Status: In Progress*

k) **All parking garages - Number of accessible parking spaces, size of spaces, signage, and door access should be standardized across all parking garages.** IASR outlines standards around accessible parking in new parking lots. Will be investigating feasibility to have this become the standard at LHSC for current parking lots. *Project Status: In Progress*

l) **VH Crosswalk between CNIB and B Building - There is currently a painted line crosswalk.**
Investigation is underway to feasibility of installing a lighted & audible crosswalk. *Project Status: In Progress*

m) **VH Crosswalk outside C Entrance - There is currently a lighted crosswalk, but as patient drop off point is on the other side of the street, visually impaired have difficulty crossing the street.**
Road design is not taking place in the next year. Investigation is underway to understand feasibility of adding audible component to crosswalk. *Project Status: In Progress*

n) **UH Crosswalk across Perth drive from main building to PDC. The colour of lights in the crosswalk is difficult to see in the sunlight.**
The light is the standard crosswalk light. Investigation is underway to understand feasibility of adding audible component to crosswalk. *Project Status: In Progress*

o) **Victoria Hospital – LRCP A3-800, A3-802 washrooms are not accessible.**
Install push button automation. *Project Status: Complete*

p) **Victoria Hospital – Endoscopy B2-220a entrance into clinic area as well as into waiting room are not accessible.**
Install push button automation on both doors. *Project Status: Complete*

q) **Victoria Hospital – IV Therapy B2-240 entrance is difficult to open.**
Install push button automation. *Project Status: Complete*

r) **University Hospital – Emergency door A1-C03 and A1-212 are difficult to open.**
Install push button automation. *Project Status: Complete*

s) **Victoria Hospital – Sanctuary C3-402 Doorway is difficult to open and threshold is a barrier.**
Replace double doors and threshold as well as install push button automation. *Project Status: Complete*

t) **University Hospital – Outpatient washrooms floors 4-10. Patient complaints about toilets being too low.**
Install 2 inch risers on all toilet seats. *Project Status: Complete*

u) **Victoria Hospital – Mental Health B8 elevator lobby, B8-C02, B8-C14, B8-C10. Doors are difficult to maneuver through for those using mobility aids.**
Install push button automation. *Project Status: Complete*

v) **Victoria Hospital –Admitting Waiting Room, C2-600. Doorway is difficult to maneuver when using a mobility aid.**
Install push button automation. *Project Status: Complete*

w) **University Hospital – Sidewalk curb cuts and tactile warning surface tiles required.**
Install 6 curb cut and tactile warning surface tiles in sidewalks around parking lot 3 and the crosswalk at PDC. *Project Status: Complete*

x) **Victoria Hospital – LRCP Washrooms A1-136 and A1-939. Increased number of accessible washrooms needed within LRCP.**
Install push button automation on doors has been installed. Replace sinks, add coat hooks and move paper towel and toilet paper dispensers. *Project Status: In Progress.*

y) **University Hospital – B1-005 Main Lobby. Water Bottle filling station required.**
Install an accessible water bottle filling station. *Project Status: Complete*

z) **Victoria Hospital – Emergency Department, D1-505 washroom, D1-506 washroom and D1-515. Doors are difficult to open when using mobility aids.**
Install push button automation*. Project Status: Complete*

6. Barrier Identification Methodology

The Accessibility Working Group used the following barrier-identification methodologies:

Methodology	Description	Status
Generated reports from the patient feedback software (FM Pro)	Patient, visitor and family complaints and compliments regarding barriers are captured using the software	Reports were reviewed by the Working Group and considered during selection and prioritization exercise
Conducted a brainstorming exercise of Accessibility Working Group members from which they drew from observations and experience	Working group members identified barriers and initiatives to overcome barriers	This input has contributed to the plan
Review of AODA Integrated Accessibility Standards Regulations	The standards outline current legislative requirements including timelines.	The standards and links have been forwarded to the most appropriate departments.
Review of initiatives from 2013/14 plan	Some initiatives are ongoing from the 2013/2043 plan	Each ongoing initiative was reconsidered for the 2014/2015 plan
Review of Project Request forms	Requests from staff for physical building changes regarding accessibility barriers.	Reviewed by Engineering and the Working group to assess feasibility and priority

7. Opportunities and Barriers to be addressed from April 2014 to March 2015

Barriers can be categorized according to seven barriers: physical, architectural, informational, communication, attitudinal, technological, and policy/practice. These categories are used in the work plan.

The Accessibility Working Group developed the following list of criteria to aid in prioritization of the barriers to be addressed in the 2014/2015 plan.

- Will the program be moving within the next year? If so, the barrier will not be addressed unless it creates a safety risk and then temporary measures will be considered.
- Is the area moving? If so, alert Facilities Planning to the accessibility issue so that it may be considered in the new space.
- Does the barrier have an impact on one specific population or does it have an impact on the broader patient population?
- Are the cost and the scope of the barrier within the scope of the Working Group?
- Does the project address access issues for those people with disabilities as defined in the AODA?

In addition to the barriers captured in the plan, other barriers will be addressed as they are identified throughout the year. Patients and visitors can alert the Working Group to barriers via email, mail, telephone or in person. Staff members can communicate barriers to any one of the Working Group members.

Process to Engage Facilities Planning (internal document only)
For projects that are classified as physical and architectural, a project request is now submitted to Facilities Management, which assesses the viability of the project and establishes its cost.

Category of Barrier & Location	Identified Barrier or Opportunity	Means to prevent or remove barrier	Indicator of success	Accountability	Timing
Architectural - University Hospital	Design washrooms off main lobby that are more accessible	Architect engaged in reconfiguring the space. Short term: Automatic door has been installed.	Accessible washrooms	Facilities Planning	*Complete by 2015.*
All categories of	Barriers are often better	Consider conducting a tour	Conduct a	Representatives	Tours scheduled

Category of Barrier & Location	Identified Barrier or Opportunity	Means to prevent or remove barrier	Indicator of success	Accountability	Timing
barriers- VH	identified by those with disabilities	with a representative from Facilities, people with a disability, and a member of the Accessibility Working Group to identify barriers	tour to identify barriers	from Engineering, member from the Accessibility Working Group, people with a variety of disabilities and their caregivers.	with advisors. *Ongoing in 2014*
Informational and Communicational- All Sites	Providing information for people to easily locate accessible washrooms and change tables.	Providing maps and signage for people to easily locate accessible washrooms and change tables. Also, posting on website for an additional avenue for people to access prior to visiting hospital.	Maps are accessible	Wayfinding Action Group	Ongoing, 14 maps have been installed at VH, additional maps to be completed. Maps at UH to be updated as renovations continue
Informational – all sites	Ensure all staff have completed both training modules: Excelling at Accessible Customer Service and AODA Accessibility Regulations	Follow up with leadership of those staff who are non-compliant on this one time training web module.	100% Compliancy rate for staff completing training	All leaders	Continuously monitoring to strive towards 100%, currently at 99% and 95%, respectively.
Informational & Communicational – all sites	People with mobility challenges require the shortest route possible from parking to department.	Tear off maps have been sent for printing and will be handed out by volunteers at main entrances. Will also be posted on website for people to print at home.	Maps are accessible	Wayfinding Action Group	*In Progress*
Physical – All parking	Number of accessible parking	Follow guidelines listed for	Determine	L. Richardson,	2014/2015

Category of Barrier & Location	Identified Barrier or Opportunity	Means to prevent or remove barrier	Indicator of success	Accountability	Timing
lots/garages	spaces, size of spaces, signage, to be standardized across all parking lots/garages	parking in the Built Environment standard of the IASR	viability, and if viable develop plan	Parking and P. Renaud	
Physical-VH Crosswalk between CNIB and B Building	There is currently a painted lines crosswalk, potential to install an audible crosswalk.	Investigate feasibility of installing an audible cross walk.	Visitors, patients, staff can safely cross	P. Renaud and Facilities Planning	2014/2015
Physical – VH & UH; Crosswalk outside C Entrance and outside PDC.	There is currently a crosswalk with lights, but visually impaired have difficulty crossing the street.	Investigate feasibility of adding the audible component to original crosswalk.	Visitors, patients, staff can safely cross	P. Renaud and Facilities Planning	2014/2015
Physical – VH; LRCP A1-136 and A1-939	Create a more accessible washroom.	Replace sinks, add coat hooks and lower paper towel and toilet paper dispensers.	Visitors, patients and staff can easily use washroom	L. Richardson	2014
Physical - VH Elevators: 7,30,31 UH Elevators: 9,10,11,12	Elevator modernization is ongoing, use opportunity to ensure accessibility features are included.	Adding audible directions and braille numbers to buttons.	Visitors, patients and staff can easily use elevators	Facilities Engineering, D. McMillan	2014/2015
Physical – VH Cardiac Fitness Institute	Create a more accessible entrance.	Install push button automation	Visitors, patients and staff can easily enter building	L. Richardson	2014
Physical – UH Sanctuary	Saloon style doors create difficulty for some entering Sanctuary	Install new doors on both entrances with push button	Visitors, patients and staff can	L. Richardson	2014

Category of Barrier & Location	Identified Barrier or Opportunity	Means to prevent or remove barrier	Indicator of success	Accountability	Timing
		automation	easily enter Sanctuary		
Physical – VH Pharmacy B1-C44	Create a more accessible entrance	Install push button automation	Visitors, patients and staff can easily enter pharmacy	L. Richardson	2014
Physical – VH E4-319 and E4-321	Currently accessible washrooms but do not have a barrier free mirror	Install a tilt mirror in each washroom.	Patients in a wheelchair are able to use mirror.	L. Richardson	2014
Physical – UH Conference rooms	Create easier accessibility into conference rooms at UH	Investigate feasibility of improving door access at UH conference rooms.	Staff and visitors are able to access conference rooms	L. Richardson	2014/2015
Communication – All Sites	Educate all staff around accessibility website upgrades	Send out an e-cast to all staff and affiliates outlining new location of website and additional tools added	Staff are informed and reference website easily	Communications	2014

8. Integrated Accessibility Standards Regulations Work plan

AODA Requirement	Deliverable	Activities	Compliance Date	Annual Status Update as of March, 2014
Reg. 191/11 s.3 Establish Policies	Implement policy on achieving accessibility within organization	Policy established and posted, provided in an accessible format upon request.	January 1st, 2013	Completed. Policy updated Feb 11th, 2014
Reg. 191/11 s.4 Accessibility Plan	Establish & implement multi-year accessibility plan, meeting requirements under the regulation. Post the plan on website. Review and update the accessibility plan at least once every 5 years. Review and update plans in consultation with persons with disabilities.	Create plan, involving applicable departments and Accessibility Working Group as well as advisors with disabilities or caregivers with disabilities. Post on website. Provide report in an accessible format upon request. Post status report on website.	January 1st, 2013	Completed. Annual status update completed as of March 2014.
Reg. 191/11 s. 5 Procuring or acquiring goods, services or facilities	Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities.	HMMS reminds all staff when making purchases to consider accessibility criteria. All RFP documentation has AODA compliance as a consideration.	January 1st, 2013	Completed
Reg .191/11 s. 6 Self-Service Kiosks	Incorporate accessibility features when designing, procuring or acquiring self-service kiosks.	HMMS reminds all staff when making purchases to consider accessibility criteria. All RFP documentation has AODA compliance as a consideration.	January 1st, 2013 In Progress	Completed

Reg. 191/11 s. 7 Training	Provide training on the requirements of accessibility standards and on Human Rights Code as it pertains to persons with disabilities.	Through e-learning, train all employees and volunteers using the tools offered on accessforward.ca	January 1st, 2014	In Progress. 95% of staff have completed e-learning module. LHSC hiring managers have also been trained with in-class sessions on employment regulations.
Reg. 191/11 s. 11 Feedback	Ensure processes for receiving and responding to feedback are accessible to persons with disabilities, upon request. Notify public about the availability of accessible formats.	Post on website the availability of accessible formats for receiving and responding to feedback. Upon request, and in consultation with requester, accommodate process for receiving and responding to feedback.	January 1st, 2014	Completed for both internal and external feedback.
Reg. 191/11 s. 13 Emergency Procedure, plans and public safety	Provide emergency procedures, plans and public safety information in an accessible format as soon as practicable, upon request.	Upon request, emergency procedures will be made available in alternate formats, with consultation of requester.	January 1st, 2012	Completed
Reg. 191/11 s.14 WCAG 2.0 Level A	All new Internet websites and web content must conform with WCAG 2.0 Level A (excluding live captioning and pre-recorded audio descriptions)	Establish a procedure that all new websites created cannot be published unless meeting the WCAG 2.0 Level A requirements. Train web designers of the WCAG requirements.	January 1st, 2014	Completed Website redesign has taken place, meeting WCAG 2.0 Level A compliancy.
Reg. 191/11 s. 14 WCAG 2.0 Level AA	All Internet websites and web content must conform with WCAG 2.0 Level AA (excluding live captioning and pre-recorded audio descriptions)	Revise internet website to conform to WCAG 2.0 Level AA requirements.	January 1st, 2021	

Reg . 191/11 s. 22 Recruitment	Notify Employees and Public about the availability of accommodation for applicants with disabilities in recruitment processes.	Statement on all job postings and career website internally and externally.	January 1st, 2014	Completed
Reg . 191/11 s. 23 Recruitment	Notify applicants once selected in assessment process that accommodations are available upon request in relation to materials or processes to be used. If requested, consult with applicant and provide arrangement that accounts for the applicant's accessibility needs.	When inviting all applicants for interview, notify that accommodations are available, if requested Assess each request on an individual basis to accommodate.	January 1st, 2014	Completed. Trained all hiring managers to ensure this requirement is being met.
Reg . 191/11 s. 24 Recruitment	When making offers of employment, notify successful applicant of its policies for accommodating employees with disabilities	Add notification to list of offer details (offer letters) HR sends out.	January 1st, 2014	Completed on all offer of employment letters.
Reg. 191/11 s. 25 Informing employees of supports (Accommodation)	Every employer shall inform its employees of policies used to support employees with disabilities, including policies on the provision of job accommodations that take into account accessibility needs. Provide this information as soon as practicable after they begin their employment.Employers shall provide updated information to its employees whenever there is a change to existing policies on the provision of job accommodation	Add reference to duty to accommodate policies in offer letter. Notify employees through e-cast of any changes/updates to the policy.	January 1st, 2014	Completed. Reference to duty to accommodate policy listed on offer of employment letter. Also, face to face meeting set up as soon as possible after hire date between new hire and occupational health, to discuss any needs required.

Reg. 191/11 s. 26 Accessible formats & Communication supports for employees	When requested, consult the needs and provide in accessible format: a)information needed in order to perform the employee's job b)information generally available to employees in the workplace	If requested, all duty outlines and job descriptions will be made available in appropriate formats (based on consultation)	January 1st, 2014	Completed. Leadership has been trained to provide information upon request in alternative formats.
Reg. 191/11 s. 27 Workplace emergency response information	Provide individualized workplace emergency response information to employees who have made aware to their employer the need for accommodation	Individualized work plans have been created by the Manager of Emergency Management to accommodate those employees who have made aware of their need.	January 1st, 2012	Ongoing. As new individuals are identified as having disabilities, more workplace emergency response plans are created.
Reg. 191/11 s. 28 Documented individual accommodation plan	Develop a written policy for developing documented individual accommodation plans (IAP)for employees with disabilities	Develop a policy and train all HRC's and occupational health on how to develop individualized work accommodation plans.	January 1st, 2014	Completed. Workplace accommodation policy revised November 29th, 2013
Reg. 191/11 s. 29 Return to Work Policy	Develop & document a return to work (RTW) policy for those who have been absent from work due to a disability and require disability-related accommodations in order to return to work. RTW shall include steps employer will take to facilitate RTW, and use the individualized accommodation plans	Occupational health and Human resources develop a policy, posting on the policy website. As employees are in process of RTW, Occ. health & HRC will work with employee to create IAP and help the employee to get back to work.	January 1st, 2014	Completed. Workplace accommodation policy revised November 29th, 2013.

Reg. 191/11 s.30 Performance Management	Take into account the accessibility needs of employees with disabilities, as well as individual accommodation plans, with using its performance management process	When rolling out training for new e-performance system, ensure leaders are trained to take into account the accessibility needs of employees. Have a statement within e-performance program that leaders have taken into account accessibility needs (check box system).	January 1st, 2014	Completed. Leadership attended in-class learning to ensure they are trained to consider accessibility needs during employee performance.
Reg. 191/11 s. 31 Career Development and Advancement	Take into account the accessibility needs of employees with disabilities as well as any IAP's when providing career development and advancement to its employees with disabilities.	All internal job postings will state accessibility needs will be taken into account during selection process.	January 1st, 2014	Completed. Leadership attended in-class learning to ensure training to consider accessibility needs during employee progression and development.
Reg. 191/11 s. 32 Redeployment	Take into account the accessibility needs of employees with disabilities, as well as individual accommodation plans, when redeploying employees with disabilities.	HR to create a procedure for redeployment, ensuring accessibility needs are taken into account before redeployment of an employee.	January 1st, 2014	Completed
Reg .191/11 s.76 Transportation	Provide accessible vehicles or equivalent services upon request.	Voyageur Transportation Services provides shuttle service on behalf of LHSC using accessible charter buses. Upon request, will meet specific needs .	July 1st, 2011	Completed
Reg. 191/11 s.80 Design of Public Spaces	For new construction and major changes to existing features of public spaces, adhere to design requirements for the following: recreational trails, outdoor public eating areas, outdoor play spaces, outdoor paths of travel, accessible parking, service-related elements like service counters, fixed queuing lines and waiting areas.	Facilities Planning to adhere to regulations in all projects to begin as of the date specified.	January 1st, 2016	In Progress

9. Communication of the plan

Each year, LHSC publishes the Accessibility Plan on its Internet website and in hard copy form. The plan is available in alternate formats upon request. The publication of the plan is communicated by the following means:

• An e-cast to staff members

• Notice in the staff newsletter *the Page*

• Posting on the LHSC website under the *Accessibility* section

• A link in a brochure entitled *Attitudinal Awareness*: *the difference you can make*, which is distributed to new staff members and students receiving clinical experience at LHSC

• Link in the *News and Events* section of the LHSC Internet website

• A copy of the plan is available from Corporate Communications and Public Relations Department, members of the Accessibility Working Group and from the Patient Experience Specialists.